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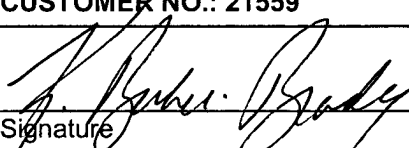
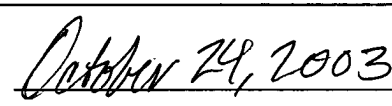
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**UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)**

Attorney Docket Number	50316/010001
Applicant	Armin Schorer
Title	SPATULA DEVICE FOR PERFORMANCE OF LARYNGOSCOPICAL TREATMENT
<b>PRIORITY INFORMATION:</b>	
<b>SMALL ENTITY STATUS:</b>	
<input checked="" type="checkbox"/> Applicant claims small entity status under 37 C.F.R. § 1.27.	
<b>APPLICATION ELEMENTS:</b>	
Cover sheet	[1] pages
Specification	[7] pages
Claims	[1] pages
Abstract	[1] pages
Drawings (Figs. 1-2)	[1] sheets
Combined Declaration and Power of Attorney, which is: <input checked="" type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input type="checkbox"/> A copy from prior application [ <b>**SERIAL NUMBER**</b> ] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	[2] pages
Sequence Statement	[**] pages
Sequence Listing on Paper	[**] pages
Sequence Listing on Diskette	[**] disk
Preliminary Amendment	[**] pages
Information Disclosure Statement	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] references
Recordation Form Cover Sheet and Assignment	[**] pages
English Translation	[**] pages

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Certified Copy of Priority Document	[**] pages
Non-publication Request under 35 U.S.C. § 122(b).	[**] pages
Request for Deferral of Examination under 37 C.F.R. § 1.103(d)	[**] pages
A Small Entity Statement	[**] pages
Return Receipt Postcard	1
<b>FILING FEES:</b>	
Basic Filing Fee: \$375	\$375.00
Excess Claims Fee: 12 - 20 x \$9	\$0
Excess Independent Claims Fee: 1 - 3 x \$42	\$0
Multiple Dependent Claims Fee: \$140	\$0
Total Fees:	\$0
<input checked="" type="checkbox"/> Enclosed is a check for \$375.00 to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges or any credits to Deposit Account No. 03-2095.	
<b>CORRESPONDENCE ADDRESS:</b>	
Kristina Bieker-Brady, Ph.D. Reg. No. 39,109 Clark & Elbing LLP 101 Federal Street Boston, MA 02110  Telephone: 617-428-0200 Facsimile: 617-428-7045  <b>CUSTOMER NO.: 21559</b>	
 Signature	 Date